

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known)

Chapter

11☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	<u>El Ideal Foods, Inc.</u>	
<hr/>		
2. All other names debtor used in the last 8 years <small>Include any assumed names, trade names and doing business as names</small>	<u>FKA Lo Ideal Foods, Inc.</u>	
<hr/>		
3. Debtor's federal Employer Identification Number (EIN)	<u>46-4599787</u>	
<hr/>		
4. Debtor's address	Principal place of business <u>4102 Atlantic Avenue</u> <u>Raleigh, NC 27604</u> <small>Number, Street, City, State & ZIP Code</small> <u>Wake</u> <small>County</small>	Mailing address, if different from principal place of business <hr/> <small>P.O. Box, Number, Street, City, State & ZIP Code</small> Location of principal assets, if different from principal place of business <hr/> <small>Number, Street, City, State & ZIP Code</small>
<hr/>		
5. Debtor's website (URL)	<hr/>	
<hr/>		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: <hr/>	
<hr/>		

Debtor **El Ideal Foods, Inc.**
Name

Case number (if known)

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. **Check all that apply:**

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☐ No
- ☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	Ferantil Food Products, Inc.	Relationship	Related Entity
District	Eastern District of North Carolina	When	14-01023-5-SW H
		Case number, if known	

Debtor **El Ideal Foods, Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (*Check all that apply.*)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____**Where is the property?** _____

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds***Check one:*☐ Funds will be available for distribution to unsecured creditors.☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.**14. Estimated number of creditors**☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☒ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☒ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **El Ideal Foods, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **August 25, 2017**
MM / DD / YYYY**X /s/ Fernando A. Roa**

Signature of authorized representative of debtor

Fernando A. Roa

Printed name

Title **President****18. Signature of attorney****X /s/ Jason L. Hendren**

Signature of attorney for debtor

Date **August 25, 2017**

MM / DD / YYYY

Jason L. Hendren

Printed name

Hendren, Redwine & Malone, PLLC

Firm name

**4600 Marriott Drive
Suite 150
Raleigh, NC 27612**

Number, Street, City, State & ZIP Code

Contact phone **(919) 420-7867**Email address **jhendren@hendrenmalone.com****NC State Bar 26869**

Bar number and State

Fill in this information to identify the case:Debtor name El Ideal Foods, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 25, 2017**X /s/ Fernando A. Roa**

Signature of individual signing on behalf of debtor

Fernando A. Roa

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:Debtor name **El Ideal Foods, Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Akli Food Attn: Managing Agent 6685 Peachtree Industrial Blvd. Atlanta, GA 30360		trade debt				\$3,116.00
Atlantic Investment Management Attn: Managing Agent 4104 Atlantic Avenue, Suite 140 Raleigh, NC 27604		rent				\$5,764.36
BB&T Attn: Managing Agent P.O. Box 698 Wilson, NC 27894		credit card debt				\$13,862.64
DJ Sab Distribution, Inc. Attn: Managing Agent 822 SW 17 Avenue Miami, FL 33135		trade debt				\$2,909.32
Farmers Imports, LLC Attn: Managing Agent 2655 Lejeune Road #309 Miami, FL 33134		trade debt				\$10,368.00
Good'O Beverage Attn: Managing Agent 117-02 15th Avenue College Point, NY 11356		trade debt				\$6,241.40

Debtor **El Ideal Foods, Inc.**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
India Beverage, Inc. Attn: Managing Agent 1401 Vile Avenue Bronx, NY 10474		trade debt				\$6,600.90
IS-PE Produce, Inc. Attn: Managing Agent 2501 W Military Way B-4 McAllen, TX 78503		trade debt				\$19,238.00
La Montana Foods Attn: Managing Agent 17842 SW 144 Court Miami, FL 33177		trade debt				\$40,658.62
Market 5201, Inc. 10613 W Sam Houston Pky N #150, Building B Houston, TX 77064		trade debt				\$3,504.00
Masabrosa, LLC Attn: Managing Agent 1238 W Street NE Washington, DC 20018		trade debt				\$78,582.00
Mexican Trading, LLC Attn: Managing Agent 3549 E. 14th Street, Suite F/G Brownsville, TX 78521		trade debt				\$36,895.51
Motor Rite, Inc. Attn: Managing Agent 1001 Corporate Parkway #100 Raleigh, NC 27610		trade debt				\$10,600.00
Nuestro Queso, LLC Attn: Managing Agent 9500 West Bryn Mawr Avenue Rosemont, IL 60018		trade debt				\$6,896.98
PahnasS.A. de C.V Blvd. Acero#1, Zona Ind. Merliot Aniguo Cusctlan El Salvador		trade debt				\$45,610.60

Debtor **El Ideal Foods, Inc.**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Queseria Favorita, LLC Attn: Managing Agent 14 Market Street Passaic, NJ 07055		trade debt				\$25,142.60
Savia USA, LLC Attn: Managing Agent 6704 Parke East Blvd. Tampa, FL 33610		trade debt				\$41,162.90
Specialized Dairy Processors Attn: Managing Agent 7900 Oak Lane #400 Hialeah, FL 33016		trade debt				\$7,815.16
Tropical Del Campo, Inc. Attn: Managing Agent 2135 NW 79th Avenue Miami, FL 33122		trade debt				\$2,550.00
Walong Marketing, Inc. Attn: Managing Agent 95 Caven Point Road Jersey City, NJ 07305		trade debt				\$3,451.10

Fill in this information to identify the case:Debtor name **EI Ideal Foods, Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property:	
Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property:	
Copy line 91A from <i>Schedule A/B</i>	\$ 470,288.97
1c. Total of all property:	
Copy line 92 from <i>Schedule A/B</i>	\$ 470,288.97

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 489,498.07
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims:	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 0.00
3b. Total amount of claims of nonpriority amount of unsecured claims:	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 475,970.09
4. Total liabilities	
Lines 2 + 3a + 3b	\$ 965,468.16

Fill in this information to identify the case:Debtor name **El Ideal Foods, Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand****\$6,706.03****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. BB&T**Checking****9755****\$0.00****3.2. Wells Fargo****Checking****5173****\$2,474.94****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$9,180.97**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. Duke Energy deposit**\$1,200.00**

Debtor El Ideal Foods, Inc.
Name

Case number (If known) _____

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No☐ Yes**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.☐ Yes Fill in the information below.**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture office furniture	Unknown	N/A	\$2,000.00

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$2,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

☒ No☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No☐ Yes**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

☐ No. Go to Part 9.☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			

Debtor El Ideal Foods, Inc. Case number (If known) _____

Name

47.1.	2003 International truck 4000 series VIN: 1HTMPAFM23H574590 (in shop)	Unknown	N/A	\$20,000.00
47.2.	2016 Ford F750 VIN: 1FDNF7DC06DA01472	Unknown	N/A	\$50,000.00
47.3.	2013 International truck 4000 series VIN: 1HTJTSM3DH326120	Unknown	N/A	\$20,000.00
47.4.	2016 Ford F750 w 22ft box	Unknown	Recent cost	\$140,000.00
48.	Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment) forklift, rack system, 20 carts, pallet jack	Unknown	N/A	\$10,500.00

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$240,500.0052. **Is a depreciation schedule available for any of the property listed in Part 8?**☒ No☐ Yes53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**☒ No☐ Yes**Part 9: Real property**54. **Does the debtor own or lease any real property?**☒ No. Go to Part 10.☐ Yes Fill in the information below.**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**☐ No. Go to Part 11.☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets "El Ideal"	Unknown	N/A	Unknown

61. **Internet domain names and websites**

Debtor El Ideal Foods, Inc. Case number (If known) _____

Name

elideal.netUnknownN/AUnknown62. **Licenses, franchises, and royalties**63. **Customer lists, mailing lists, or other compilations****Customer List****(may be provided upon request)**UnknownN/AUnknown64. **Other intangibles, or intellectual property**65. **Goodwill**66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.0067. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.☐ Yes Fill in the information below.

Debtor El Ideal Foods, Inc.
Name

Case number (If known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$9,180.97	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$1,200.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$48,503.27	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$168,904.73	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$2,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$240,500.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$470,288.97	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$470,288.97

Fill in this information to identify the case:Debtor name **El Ideal Foods, Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	APZB Industries Creditor's Name Attn: Managing Agent 300 Ledgewood Place, Suite 301 Rockland, MA 02370 Creditor's mailing address Creditor's email address, if known Date debt was incurred 5/6/2013 Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien All assets of the company Describe the lien UCC-1 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	Unknown

2.2	BB&T Creditor's Name Attn: Managing Agent P.O. Box 698 Wilson, NC 27894 Creditor's mailing address Creditor's email address, if known Date debt was incurred 8/11/2016 Last 4 digits of account number Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien All assets of the company Describe the lien UCC-1 Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$88,749.11	Unknown
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Debtor **El Ideal Foods, Inc.**

Case number (if know)

Name

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed

2.3

Corporation Service Company

Creditor's Name

**Attn: Managing Agent
P.O. Box 2576
Springfield, IL 62708**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**12/26/2012****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

All assets of the company**Unknown****Unknown**

Describe the lien

UCC-1

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed2.4 **Direct Capital**

Creditor's Name

**Attn: Managing Agent
155 Commerce Way
Portsmouth, NH 03801**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**2/2/2016****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

All assets of the company**\$153,462.40****Unknown**

Describe the lien

UCC-1

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed2.5 **Ferantil Food Products, Inc.**

Creditor's Name

**Attn: Managing Agent
4102 Atlantic Avenue
Raleigh, NC 27604**

Creditor's mailing address

Describe debtor's property that is subject to a lien

4 trucks, food supplies, forklift, pallet jack, two (2) computer servers, three (3) Dell computers, office equipment and all other personal property listed in Security Agreement dated 2/17/2014**\$82,962.30****Unknown**

Describe the lien

Debtor **El Ideal Foods, Inc.**
Name

Case number (if know)

UCC-1

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Creditor's email address, if known

Date debt was incurred

3/24/2014

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

2.6

Ford Motor Credit Company

Creditor's Name

**P.O. Box 105704
Atlanta, GA 30348**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

11/23/2015

Last 4 digits of account number

6480

Do multiple creditors have an interest in the same property?

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

2016 Ford F750**VIN: 1FDNF7DC06DA01472**

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**\$50,568.06****\$50,000.00**

2.7

Ford Motor Credit Company

Creditor's Name

**P.O. Box 105704
Atlanta, GA 30348**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

8/15/2017

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien

2016 Ford F750 w 22ft box

Describe the lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

\$98,110.70**\$140,000.00**

Debtor **El Ideal Foods, Inc.**

Case number (if know)

Name

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed

2.8

Keystone Equipment Finance Corp.

Creditor's Name

**Attn: Managing Agent
P.O. Box 330429
West Hartford, CT
06133-9938**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**1/26/2016****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**2003 International truck 4000 series
VIN: 1HTMPAFM23H574590
(in shop)****\$15,645.50****\$20,000.00**

Describe the lien

UCC-1

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

2.9

World Global Financing, Inc.

Creditor's Name

**Attn: Managing Agent
141 NE 3rd Avenue, Floor
12
Miami, FL 33132**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**3/14/2015****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

All assets of the company**Unknown****Unknown**

Describe the lien

UCC-1

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$489,498.07**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

Debtor **El Ideal Foods, Inc.**

Case number (if know)

Name

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?Last 4 digits of
account number for
this entity

Cindy G. Oliver
Morris, Russell, Eagle & Worley
2235 Gateway Access Point, Suite 20
Raleigh, NC 27607

Line 2.5

Corporation Service Company
801 Adlai Stevenson Drive
Springfield, IL 62703

Line 2.4

Rapid Financial Services, LLC
Attn: Managing Agent
4500 East West Highway, 6th Floor
Bethesda, MD 20814

Line 2.9

Richard D. Sparkman
Chapter 7 Trustee
P.O. Box 1687
Angier, NC 27501-1687

Line 2.5

The Connor Law Firm
2501 Blue Ridge Road, Ste 250
Raleigh, NC 27607

Line 2.5

Fill in this information to identify the case:Debtor name **El Ideal Foods, Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address Dept. of Employment Security Attn: Managing Agent P.O. Box 25903 Raleigh, NC 27611-5903	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: For Notice Purposes Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19114-0326	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: For Notice Purposes Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	El Ideal Foods, Inc.	Case number (if known)	
	Name		

2.3	Priority creditor's name and mailing address NC Department of Revenue Attn: Bankruptcy Department P.O. Box 1168 Raleigh, NC 27602-1168	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Wake County Dept. of Revenue Attn: Managing Agent P.O. Box 2331 Raleigh, NC 27602	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim	
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3.1	Nonpriority creditor's name and mailing address Akli Food Attn: Managing Agent 6685 Peachtree Industrial Blvd. Atlanta, GA 30360	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,116.00	
	Date(s) debt was incurred	Basis for the claim: <u>trade debt</u>		
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.2	Nonpriority creditor's name and mailing address Atlantic Investment Management Attn: Managing Agent 4104 Atlantic Avenue, Suite 140 Raleigh, NC 27604	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,764.36	
	Date(s) debt was incurred	Basis for the claim: <u>rent</u>		
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

3.3	Nonpriority creditor's name and mailing address BB&T Attn: Managing Agent P.O. Box 698 Wilson, NC 27894	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$13,862.64	
	Date(s) debt was incurred	Basis for the claim: <u>credit card debt</u>		
	Last 4 digits of account number	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	El Ideal Foods, Inc. Name _____	Case number (if known) _____
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3.4	Nonpriority creditor's name and mailing address DJ Sab Distribution, Inc. Attn: Managing Agent 822 SW 17 Avenue Miami, FL 33135 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,909.32 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.5	Nonpriority creditor's name and mailing address Farmers Imports, LLC Attn: Managing Agent 2655 Lejeune Road #309 Miami, FL 33134 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,368.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.6	Nonpriority creditor's name and mailing address Fernando Roa 6300 Terra Verde Drive Raleigh, NC 27609 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$105,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.7	Nonpriority creditor's name and mailing address Good'O Beverage Attn: Managing Agent 117-02 15th Avenue College Point, NY 11356 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,241.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.8	Nonpriority creditor's name and mailing address India Beverage, Inc. Attn: Managing Agent 1401 Viele Avenue Bronx, NY 10474 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,600.90 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.9	Nonpriority creditor's name and mailing address IS-PE Produce, Inc. Attn: Managing Agent 2501 W Military Way B-4 McAllen, TX 78503 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$19,238.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.10	Nonpriority creditor's name and mailing address La Montana Foods Attn: Managing Agent 17842 SW 144 Court Miami, FL 33177 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$40,658.62 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	El Ideal Foods, Inc. <small>Name</small>	Case number (if known) _____
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3.11	Nonpriority creditor's name and mailing address Market 5201, Inc. 10613 W Sam Houston Pky N #150, Building B Houston, TX 77064 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,504.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.12	Nonpriority creditor's name and mailing address Masabrosa, LLC Attn: Managing Agent 1238 W Street NE Washington, DC 20018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$78,582.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.13	Nonpriority creditor's name and mailing address Mexican Trading, LLC Attn: Managing Agent 3549 E. 14th Street, Suite F/G Brownsville, TX 78521 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$36,895.51 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.14	Nonpriority creditor's name and mailing address Motor Rite, Inc. Attn: Managing Agent 1001 Corporate Parkway #100 Raleigh, NC 27610 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10,600.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.15	Nonpriority creditor's name and mailing address Nuestro Queso, LLC Attn: Managing Agent 9500 West Bryn Mawr Avenue Rosemont, IL 60018 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,896.98 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.16	Nonpriority creditor's name and mailing address PahnasS.A. de C.V Blvd. Acero#1, Zona Ind. Merliot Aniguo Cusctlan El Salvador Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$45,610.60 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.17	Nonpriority creditor's name and mailing address Queseria Favorita, LLC Attn: Managing Agent 14 Market Street Passaic, NJ 07055 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$25,142.60 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **El Ideal Foods, Inc.**

Name

Case number (if known)

3.18 Nonpriority creditor's name and mailing address

Savia USA, LLC
Attn: Managing Agent
6704 Parke East Blvd.
Tampa, FL 33610

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.***\$41,162.90**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: trade debtIs the claim subject to offset? ☒ No ☐ Yes

3.19 Nonpriority creditor's name and mailing address

Specialized Dairy Processors
Attn: Managing Agent
7900 Oak Lane #400
Hialeah, FL 33016

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.***\$7,815.16**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: trade debtIs the claim subject to offset? ☒ No ☐ Yes

3.20 Nonpriority creditor's name and mailing address

Tropical Del Campo, Inc.
Attn: Managing Agent
2135 NW 79th Avenue
Miami, FL 33122

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.***\$2,550.00**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: trade debtIs the claim subject to offset? ☒ No ☐ Yes

3.21 Nonpriority creditor's name and mailing address

Walong Marketing, Inc.
Attn: Managing Agent
95 Caven Point Road
Jersey City, NJ 07305

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.***\$3,451.10**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: trade debtIs the claim subject to offset? ☒ No ☐ Yes**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts5a. \$ **0.00**5b. + \$ **475,970.09**5c. \$ **475,970.09**

Fill in this information to identify the case:Debtor name El Ideal Foods, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **lease of office located at 4102 Atlantic Avenue, Raleigh**

State the term remaining

List the contract number of any government contract _____

**Atlantic Investment Management
Attn: Managing Agent
4104 Atlantic Avenue, Suite 140
Raleigh, NC 27604**

Fill in this information to identify the case:Debtor name **EI Ideal Foods, Inc.**United States Bankruptcy Court for the: **EASTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:***2.1 Ferantil Food Products, Inc.****Attn: Managing Agent
4102 Atlantic Avenue
Raleigh, NC 27604****Corporation Service Company**☒ D **2.3**
☐ E/F _____
☐ G _____**2.2 Ferantil Food Products, Inc.****Attn: Managing Agent
4102 Atlantic Avenue
Raleigh, NC 27604****APZB Industries**☒ D **2.1**
☐ E/F _____
☐ G _____**2.3 Fernando Roa****6300 Terra Verde Drive
Raleigh, NC 27609****World Global Financing, Inc.**☒ D **2.9**
☐ E/F _____
☐ G _____

Fill in this information to identify the case:Debtor name El Ideal Foods, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From 1/01/2017 to **Filing Date****Sources of revenue**
Check all that apply☒ Operating a business☐ Other _____**Gross revenue**
(before deductions and exclusions)\$1,790,767.77**For prior year:**From 1/01/2016 to 12/31/2016☒ Operating a business☐ Other _____\$3,094,529.00**For year before that:**From 1/01/2015 to 12/31/2015☒ Operating a business☐ Other _____\$3,068,937.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**
Check all that apply

Debtor **El Ideal Foods, Inc.**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Rapid Advance Attn: Managing Agent 4500 East West Highway, 6th Floor Bethesda, MD 20814	5/27/2017 - 8/25/2017	\$105,082.20	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other____
3.2. BB&T Attn: Managing Agent P.O. Box 698 Wilson, NC 27894	5/27/2017 - 8/25/2017	\$6,695.63	<input type="checkbox"/> Secured debt <input checked="" type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other____
3.3. Ford Motor Credit Company P.O. Box 105704 Atlanta, GA 30348	8/15/2017	\$8,300.00	<input checked="" type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Down payment toward vehicle finance</u>
3.4. Atlantic Investment Management Attn: Managing Agent 4104 Atlantic Avenue, Suite 140 Raleigh, NC 27604	5/27/2017 - 8/25/2017	\$17,293.08	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>rent</u>
3.5. G.K. Skagg, Inc. Attn: Managing Agent 100 Pacifica Irvine, CA 92618	5/27/2017 - 8/25/2017	\$26,519.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other____
3.6. Masabrosa, LLC Attn: Managing Agent 1238 W Street NE Washington, DC 20018	5/27/2017 - 8/25/2017	\$207,187.50	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other____
3.7. Mexican Trading, LLC Attn: Managing Agent 3549 E. 14th Street, Suite F/G Brownsville, TX 78521	5/27/2017 - 8/25/2017	\$31,374.89	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other____
3.8. Nationwide Insurance Attn: Managing Agent P.O. Box 607 Norwood, MA 02062	5/27/2017 - 8/25/2017	\$6,323.55	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>insurance</u>

Debtor **El Ideal Foods, Inc.**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.9. Nital Trading Co., Inc. Attn: Managing Agent 7281 NW 78th Terrace Miami, FL 33166	5/27/2017 - 8/25/2017	\$44,319.63	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.10 Savia USA, LLC Attn: Managing Agent 6704 Parke East Blvd. Tampa, FL 33610	5/27/2017 - 8/15/2017	\$20,723.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.11 The Quay Corporation, Inc. Attn: Managing Agent 7101 N Capitol Drive Lincolnwood, IL 60712	5/27/2017 - 8/25/2017	\$8,638.18	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.12 Internal Revenue Service Centralized Insolvency Operations P.O. Box 7346 Philadelphia, PA 19114-0326	5/27/2017 - 8/25/2017	\$14,617.75	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>taxes</u>
3.13 World Global Financing, Inc. Attn: Managing Agent 141 NE 3rd Avenue, Floor 12 Miami, FL 33132	8/27/2017 - 8/25/2017	\$7,305.75	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

Debtor **El Ideal Foods, Inc.**

Case number (if known)

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (<i>Schedule A/B: Assets – Real and Personal Property</i>).</p>		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **El Ideal Foods, Inc.**

Case number (if known)

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Hendren, Redwine & Malone, PLLC 4600 Marriott Drive Suite 150 Raleigh, NC 27612		8/9/2017	\$20,000.00
	Email or website address			
	Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1	Hielo Peravia Presidente Billini #37 Bani RD	2008 Chevrolet truck VIN 0649	2015	\$0.00
	Relationship to debtor President's father			
13.2	unknown	2004 Isuzu VIN: 2363	2015	\$3,000.00
	Relationship to debtor none			
13.3	unknown	1999 Chevrolet truck VIN 1582	2015	\$0.00
	Relationship to debtor none			
13.4	unknown	2008 Ford truck VIN: 5146 (wrecked total loss- insurance claim)	2015	\$15,000.00
	Relationship to debtor none			

Part 7: Previous Locations

Debtor **El Ideal Foods, Inc.**

Case number (if known)

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. PNC Bank Attn: Managing Agent P.O. Box 5570 Cleveland, OH 44101-0570	XXXX-3545	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other ____	10/2016	\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

Debtor **El Ideal Foods, Inc.**

Case number (if known)

☐ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☐ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

Debtor **El Ideal Foods, Inc.**

Case number (if known)

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None
Business name address**Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

Dates business existed**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None
Name and address**Date of service
From-To**

26a.1. **Angiecorp Accounting & Tax Co.**
Attn: Managing Agent
4104 Atlantic Avenue
Raleigh, NC 27604

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None
Name and address**If any books of account and records are
unavailable, explain why**

26c.1. **Angiecorp Accounting & Tax Co.**
Attn: Managing Agent
4104 Atlantic Avenue
Raleigh, NC 27604

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None
Name and address**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.
**Name of the person who supervised the taking of the
inventory****Date of inventory****The dollar amount and basis (cost, market,
or other basis) of each inventory**27.1 **Fernando Roa****8/18/2017****181,301.61****Name and address of the person who has possession of
inventory records**

Fernando Roa
6300 Terra Verde Drive
Raleigh, NC 27609

Debtor **El Ideal Foods, Inc.**

Case number (if known)

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.2	Fernando Roa	7/31/2017	\$244,399.52

Name and address of the person who has possession of inventory records

Fernando Roa
6300 Terra Verde Drive
Raleigh, NC 27609

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Fernando Roa	6300 Terra Verde Drive Raleigh, NC 27609	President	100%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Fernando Roa 6300 Terra Verde Drive Raleigh, NC 27609	\$78,000.00	8/2016 - 8/2017	W2 Wages
	Relationship to debtor President			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

Debtor El Ideal Foods, Inc.

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 25, 2017

/s/ Fernando A. Roa

Signature of individual signing on behalf of the debtor

Fernando A. Roa

Printed name

Position or relationship to debtor President

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

**United States Bankruptcy Court
Eastern District of North Carolina**

In re **El Ideal Foods, Inc.**

Debtor(s)

Case No.

Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Fernando Roa 6300 Terra Verde Drive Raleigh, NC 27609			100%

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **August 25, 2017**Signature **/s/ Fernando A. Roa
Fernando A. Roa**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Eastern District of North Carolina**

In re **El Ideal Foods, Inc.**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **August 25, 2017**

/s/ Fernando A. Roa

Fernando A. Roa/President

Signer/Title

Akli Food
Attn: Managing Agent
6685 Peachtree Industrial Blvd.
Atlanta, GA 30360

DJ Sab Distribution, Inc.
Attn: Managing Agent
822 SW 17 Avenue
Miami, FL 33135

Keystone Equipment Finance Corp
Attn: Managing Agent
P.O. Box 330429
West Hartford, CT 06133-9938

APZB Industries
Attn: Managing Agent
300 Ledgewood Place, Suite 301
Rockland, MA 02370

Farmers Imports, LLC
Attn: Managing Agent
2655 Lejeune Road #309
Miami, FL 33134

La Montana Foods
Attn: Managing Agent
17842 SW 144 Court
Miami, FL 33177

Atlantic Investment Management
Attn: Managing Agent
4104 Atlantic Avenue, Suite 140
Raleigh, NC 27604

Ferantil Food Products, Inc.
Attn: Managing Agent
4102 Atlantic Avenue
Raleigh, NC 27604

Market 5201, Inc.
10613 W Sam Houston Pky N
#150, Building B
Houston, TX 77064

BB&T
Attn: Managing Agent
P.O. Box 698
Wilson, NC 27894

Fernando Roa
6300 Terra Verde Drive
Raleigh, NC 27609

Masabrosa, LLC
Attn: Managing Agent
1238 W Street NE
Washington, DC 20018

Cindy G. Oliver
Morris, Russell, Eagle & Worley
2235 Gateway Access Point, Suite 20
Raleigh, NC 27607

Ford Motor Credit Company
P.O. Box 105704
Atlanta, GA 30348

Mexican Trading, LLC
Attn: Managing Agent
3549 E. 14th Street, Suite F/G
Brownsville, TX 78521

Corporation Service Company
Attn: Managing Agent
P.O. Box 2576
Springfield, IL 62708

Good'O Beverage
Attn: Managing Agent
117-02 15th Avenue
College Point, NY 11356

Motor Rite, Inc.
Attn: Managing Agent
1001 Corporate Parkway #100
Raleigh, NC 27610

Corporation Service Company
801 Adlai Stevenson Drive
Springfield, IL 62703

India Beverage, Inc.
Attn: Managing Agent
1401 Viele Avenue
Bronx, NY 10474

NC Department of Revenue
Attn: Bankruptcy Department
P.O. Box 1168
Raleigh, NC 27602-1168

Dept. of Employment Security
Attn: Managing Agent
P.O. Box 25903
Raleigh, NC 27611-5903

Internal Revenue Service
Centralized Insolvency Operations
P.O. Box 7346
Philadelphia, PA 19114-0326

Nuestro Queso, LLC
Attn: Managing Agent
9500 West Bryn Mawr Avenue
Rosemont, IL 60018

Direct Capital
Attn: Managing Agent
155 Commerce Way
Portsmouth, NH 03801

IS-PE Produce, Inc.
Attn: Managing Agent
2501 W Military Way B-4
McAllen, TX 78503

PahnasS.A. de C.V
Blvd. Acero#1, Zona Ind.
Merliot Aniguo Cusctlan
El Salvador

Queseria Favorita, LLC
Attn: Managing Agent
14 Market Street
Passaic, NJ 07055

World Global Financing, Inc.
Attn: Managing Agent
141 NE 3rd Avenue, Floor 12
Miami, FL 33132

Rapid Financial Services, LLC
Attn: Managing Agent
4500 East West Highway, 6th Floor
Bethesda, MD 20814

Richard D. Sparkman
Chapter 7 Trustee
P.O. Box 1687
Angier, NC 27501-1687

Savia USA, LLC
Attn: Managing Agent
6704 Parke East Blvd.
Tampa, FL 33610

Specialized Dairy Processors
Attn: Managing Agent
7900 Oak Lane #400
Hialeah, FL 33016

The Connor Law Firm
2501 Blue Ridge Road, Ste 250
Raleigh, NC 27607

Tropical Del Campo, Inc.
Attn: Managing Agent
2135 NW 79th Avenue
Miami, FL 33122

Wake County Dept. of Revenue
Attn: Managing Agent
P.O. Box 2331
Raleigh, NC 27602

Walong Marketing, Inc.
Attn: Managing Agent
95 Caven Point Road
Jersey City, NJ 07305

**United States Bankruptcy Court
Eastern District of North Carolina**

In re **El Ideal Foods, Inc.**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **El Ideal Foods, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

August 25, 2017

Date

/s/ Jason L. Hendren

Jason L. Hendren

Signature of Attorney or Litigant
Counsel for **El Ideal Foods, Inc.**

Hendren, Redwine & Malone, PLLC

4600 Marriott Drive

Suite 150

Raleigh, NC 27612

(919) 420-7867 Fax:(919) 420-0475

jhendren@hendrenmalone.com